- (e) A determination with respect to reinstatement is not appealable or reviewable except as provided in § 1001.3004.
- (f) An ALJ may not require reinstatement of an individual or entity in accordance with this chapter.

[57 FR 3330, Jan. 29, 1992, as amended at 63 FR 46691, Sept. 2, 1998; 64 FR 39427, July 22, 1999]

# § 1001.3003 Approval of request for reinstatement.

- (a) If the OIG grants a request for reinstatement, the OIG will—  $\,$
- (1) Give written notice to the excluded individual or entity specifying the date of reinstatement;
- (2) Notify HCFA of the date of the individual's or entity's reinstatement;
- (3) Notify appropriate Federal and State agencies that administer health care programs that the individual or entity has been reinstated into all Federal health care programs; and
- (4) To the extent applicable, give notice to others that were originally notified of the exclusion.
- (b) A determination by the OIG to reinstate an individual or entity has no effect if a Federal health care program has imposed a longer period of exclusion under its own authorities.

[64 FR 39428, July 22, 1999]

## §1001.3004 Denial of request for reinstatement.

- (a) If a request for reinstatement is denied, OIG will give written notice to the requesting individual or entity. Within 30 days of the date on the notice, the excluded individual or entity may submit:
- (1) Documentary evidence and written argument against the continued exclusion,
- (2) A written request to present written evidence and oral argument to an OIG official, or
- (3) Both documentary evidence and a written request.
- (b) After evaluating any additional evidence submitted by the excluded individual or entity (or at the end of the 30-day period, if none is submitted), the OIG will send written notice either confirming the denial, and indicating that a subsequent request for reinstatement will not be considered until

- at least one year after the date of denial, or approving the request consistent with the procedures set forth in §1001.3003(a).
- (c) The decision to deny reinstatement will not be subject to administrative or judicial review.

### § 1001.3005 Reversed or vacated decisions.

- (a) An individual or entity will be reinstated into Medicare, Medicaid and other Federal health care programs retroactive to the effective date of the exclusion when such exclusion is based on—
- (1) A conviction that is reversed or vacated on appeal; or
- (2) An action by another agency, such as a State agency or licensing board, that is reversed or vacated on appeal.
- (b) If an individual or entity is reinstated in accordance with paragraph (a) of this section, HCFA and other Federal health care programs will make payment for services covered under such program that were furnished or performed during the period of exclusion.
- (c) The OIG will give notice of a reinstatement under this section in accordance with §1001.3003(a).
- (d) An action taken by the OIG under this section will not require any other Federal health care program to reinstate the individual or entity if such program has imposed an exclusion under its own authority.

[57 FR 3330, Jan. 29, 1992, as amended at 64 FR 39428, July 22, 1999]

### PART 1002—PROGRAM INTEG-RITY—STATE-INITIATED EXCLU-SIONS FROM MEDICAID

#### Subpart A—General Provisions

Sec.

1002.1 Scope and purpose.

1002.2 General authority.

1002.3 Disclosure by providers and State Medicaid agencies.

1002.100 State plan requirement.

#### Subpart B—Mandatory Exclusion

1002.203 Mandatory exclusion.